

Reaching Home: Regional Municipality of Halton Homelessness Plan, 2019 – 2024

Note:

All communities receiving funding from Designated Communities stream are required to use this template in order to complete the community plan under Reaching Home. In completing this template, communities are encouraged to develop comprehensive community plans that reflect the contributions of all funding partners, including other orders of governments, not-for-profit organizations, and the for-profit sector.

Please note that in communities that receive funding from both the Designated Communities and Indigenous Homelessness streams, cross-stream collaboration is expected to promote the adoption of a community-wide planning process and support the achievement of community-level outcomes reflecting the needs of the whole community. To support communities in completing their community plans, a Reference Guide has been developed. It is recommended that this be reviewed prior to completing your community's homelessness plan to ensure understanding of the requirements and completeness.

The Community Plan for Reaching Home must be approved by the Community Advisory Board (CAB) of the Designated Community before it is submitted to Service Canada. If your community is developing a joint plan with the Indigenous Community Entity, both Community Advisory Boards must approve the community plan.

In addition to the core requirements provided in this template, communities may also wish to include other components that provide insight into the community's housing and homelessness context or contribute to community-level homelessness challenges, such as a map of the community's current homelessness services and/or gaps in homelessness services or infrastructure (e.g. housing stock). Communities have full flexibility in drafting

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1. Community Engagement

The Community Entity (CE) worked with the Community Advisory Board (CAB) to ensure a sound understanding of Reaching Home (RH) directives, terms and conditions, as well as establishing an understanding of how baseline targets for Calls for Proposals (CFP) should be incorporated into the process. The CE engaged Government, private, non-for profit stakeholders in the community.

For the last two years, a large interdisciplinary Action Table guided by Halton Region's Community Safety and Well Being (CSWB) Plan was convened to look at homelessness in our community. See also the question on Coordinated Access for timing of engagements specific to the CAB on homelessness.

CSWB includes Executive level staff from all four local municipalities, both local LHIN's, our two major hospitals, the school boards, the Chief of Police and the CAO of Halton Region.

In 2017, Halton Region and the Halton Regional Police Service introduced a Community Safety and Well-Being Plan. The Plan sets out how we work with community partners to improve the safety, health and well-being of Halton residents.

Community input: The community helped to shape the plan and focus on key issues. More than 500 people answered our survey or came out to public meetings held in Burlington, Halton Hills, Milton and Oakville.

Who leads the plan?: A leadership group has been created to lead the Plan:

- Halton Region
- Halton Regional Police Service
- Local Health Integration Networks
- Local hospitals
- Local boards of education
- Local municipalities

This group and specific Action Tables (working groups) continue to work with the community to identify key issues and find the right solutions to priority issues.

What are the issues and what actions have been taken?: Community partners from across Halton are working collaboratively on the following key issues and initiatives:

- Enhancing access to mental health supports for children and youth: Reach Out Centre for Kids (ROCK) and local providers of child and youth mental health services are establishing a designated point of access to the child and youth mental health system to make it easier for children, youth and their families to connect to the right services at the right time.
- Creating a more coordinated approach to homelessness: A framework has been established to strengthen how Halton Region and service providers identify and support individuals who are homeless or at risk of homelessness. This includes a centralized model of intake and referral, a common assessment tool and greater connectivity to mental health services.
- Home Suite Hope received \$85,000 from the Halton Region Community Investment Fund (HRCIF) to develop a pilot project to enhance access to life skills programming for single parents and individuals at risk of homelessness.
- Improving the response to sexual assault: Sexual Assault Advisory Committee has completed an initial review of sexual assault investigations by the Halton Regional Police Service. Recommendations have been brought forward to the Halton Police Board to enhance investigative practices and make it easier for survivors to come forward. In addition, more than 500 officers have been trained on how to support sexual assault survivors.
- Supporting youth exiting child welfare services: Community partners have developed a model to support youth exiting the care of child welfare services. Halton Children's Aid Society (CAS) received \$100,669 from the Halton Region Community Investment Fund this year to support the implementation of a pilot program for youth aged 18 to 24 leaving the child welfare system to improve their access to education, employment and/or training.

Halton CAS has also received \$25,550 to create two housing opportunities through the Halton CAS Host Home program for youth aged 18 to 24 leaving the child welfare system and participating in an HRCIF-funded pilot program to improve outcomes related to education, employment and/or training.

- Reducing harmful alcohol consumption: Work has begun on a community alcohol report that will provide a broad range of perspectives on alcohol consumption in Halton and contribute insights to a strategy to reduce harmful alcohol consumption and related health and social impacts.
- Reducing isolation among older adults: An action plan has been developed to strengthen how the community identifies and supports older adults who are isolated or at risk of isolation. Links2Care received \$105,000 through the Halton Region Community Investment Fund (HRCIF) to identify and support older adults who are isolated or at-risk of isolation. Community Development Halton received \$60,000 through the HRCIF to hire a part-time coordinator for the Halton Senior Connectors program, which offers resources and referrals for older adults. Oakville Meals on Wheels received \$40,740 through the HRCIF to support the agency's ongoing operations of delivering meals to older adults and preventing isolation.
- Creating support for individuals with a developmental disability and a mental health issue: A working group has been established to explore a Halton framework to more effectively serve youth who have a developmental disability and are in need of mental health services.
- Addressing opioid use and related harms: This working group will develop a coordinated, community-based, evidence-informed approach to addressing opioid use and opioid related harms in Halton. To learn more about the key initiatives, read the following Council reports:
 - June 19, 2019 – [SS-11-19/MO-15-19 - Update on Halton Community Safety and Well-Being Plan](#)
 - November 20, 2019 – [SS-28-19 - In-year Halton Region Community Investment Fund Grants](#)

What are the next steps?: Throughout 2019, Action Tables (working groups) will further develop and implement strategies to support key issues.

How can I bring an issue forward?: The Plan has established an approach to how we address safety and well-being in Halton. Community partners can bring forward emerging issues by emailing safetyandwell-being@halton.ca or calling 311.

Engagement on Indigenous Issues with the Halton Community Legal Services

Halton has also participated in significant engagement with Indigenous issues in Halton through our formal partnership with Halton Community Legal Services.

Halton Community Legal Services (HCLS) is a community legal clinic with core funding provided by Legal Aid Ontario. As a community legal clinic, the mandate of HCLS under Ontario's Legal Aid Services Act is to 1) determine the legal needs of the individuals and

communities served or to be served by the clinic, and 2) ensure that the clinic provides legal aid services in the areas of clinic law in accordance with those needs. Under its memorandum of understanding with Legal Aid Ontario, “clinic law services” are defined as legal and other services provided under the Act in clinic law areas, and includes legal representation and advice, community development and organizing, law reform, and public legal education. HCLS’s legal services policy requires the clinic to provide direct law services to low-income residents of Halton in these core areas: provincial social assistance including matters under the Ontario Works Act and Ontario Disability Support Program Act tenant rights employment insurance Canada Pension Plan – disability employment standards human rights. Since the confederation of Canada in 1867, as the Truth and Reconciliation Commission of Canada (TRC) recognized, the colonial justice system and the legal profession have allowed for, or have been used to further, the legitimization of oppressive government conduct and policies towards Indigenous peoples. In 2016, HCLS signed a partnership agreement with 15 legal clinics in southwestern Ontario to address systemic barriers to serving the Indigenous community. In October 2017, HCLS’s board publicly committed to addressing the TRCs Calls to Action, and will review the clinic’s policies, practices, procedures and services that affect the Indigenous community in Halton in its next strategic plan.

It should therefore come as little surprise that an entire section of the commission’s “Calls to Action” and related recommendations are directed towards the justice system. The Indigenous community is inherently distrustful of the justice system, and Indigenous service providers are justifiably skeptical of mainstream, government-funded agencies that lack an adequate understanding of the Indigenous context and a demonstrated commitment to long-term relationship-building. HCLS understands that improved access to justice can be achieved for Indigenous clients by working with them, the local Indigenous community, and Indigenous social agencies and networks to: 1) build relationships and trust, 2) develop the competence to provide culturally respectful and appropriate services, and 3) foster and improve coordination and integration with other legal aid services and community partners across all public sectors.

While Indigenous client numbers are low, HCLS has built trust with these clients, including those who have been provided with housing law services related to illegal eviction, housing in a poor state of repair, the experience of homelessness, difficulty accessing services and finding affordable housing, and with those who have experienced racism and discrimination as part of these issues. HCLS has also spearheaded engagement with the Indigenous community in the development of the Halton Consolidated Courthouse, participated on the Indigenous Education Advisory Committee for Halton’s public and Catholic school boards, and is leading the “I Am Affected” campaign in Halton to raise awareness of intergenerational trauma on the Indigenous population resulting from Indian residential schools, the Sixties Scoop of Indigenous children from their families and communities, and racism and violence against Indigenous women and girls. The non-Indigenous clinic staff who have assisted in this work have been guided by a part-time Indigenous Justice Coordinator and supported by Legal Aid Ontario’s Indigenous Justice Strategy policy counsel, both of whom are Indigenous.

A project statement of principles was developed to guide the project and to ensure intercultural safety. The project seeks to answer the following questions: (1) What is the community profile of Indigenous peoples who are at risk of homelessness or are homeless in Halton? (2) What is the experience of Indigenous peoples who are at risk of homelessness or are homeless in Halton? (3) Are there particular elements, issues, types of trauma or other factors that create homelessness in the Indigenous population? (4) What are their movement and mobility patterns in seeking supports for housing stability? Where do they go for help? (5) What are the relationships between Indigenous peoples and the agencies, services and individuals that give them support and/or shelter? (6) What services, processes, approaches and changes would benefit their lives by reducing or preventing homelessness?

HCLS has undertaken this project, funded in part by the Government of Canada's Homelessness Partnering Strategy Program and Legal Aid Ontario, to address knowledge gaps and define service priorities for Indigenous people who experience homelessness in Halton. The shared knowledge that results will be used to foster strategic partnerships and create an action plan that can be funded through coordination between levels of government or departments within the same level of government. This is crucial, since there is a particular need to build community capacity and partnerships to meet the needs of Indigenous peoples in Halton. Project funding has already been used to hire an Indigenous community worker to gather knowledge and carry out qualitative research. A project advisory committee was also formed, consisting of Indigenous service providers from Peel and Hamilton, non-Indigenous service providers from Halton, and Indigenous people with lived experience of homelessness. A project statement of principles was developed to guide the project and to ensure intercultural safety. The project seeks to answer the following questions: (1) What is the community profile of Indigenous peoples who are at risk of homelessness or are homeless in Halton? (2) What is the experience of Indigenous peoples who are at risk of homelessness or are homeless in Halton? The project will proceed in three stages, using a range of methodologies. Stage 1 includes the completion of an environmental scan and literature review. This will be followed by qualitative research including interviews, focus groups and listening circles in Stage 2, leading to the development of a community action plan in Stage 3.

Overall, Halton Region's Indigenous population increased by 35.8%, or 1440 people. The greatest concentration is in Burlington, which by the census counts had 37.7% of the region's Indigenous people in 2011 and 36.2% in 2016. As might be expected, the Indigenous population is younger than the general population. In each region, the percentage of Indigenous people aged 15 to 24 is higher than the equivalent percentage of the non-Indigenous population. The average age of the Indigenous population in Milton is the lowest among the four regions of Halton. Milton also has the fastest-growing Indigenous population. The highest percentage of Indigenous people aged 15–24 is in Halton Hills.

Income

Between 2011 and 2016, Halton Region's household income rose by 4.2% to \$103,009 and ranked first among the 49 census divisions in Ontario. The median household income was 39% and 46% higher than the provincial and national medians, respectively.

Within Halton, Oakville had the highest median household income at \$113,666.6 The proportion of households with earnings over \$100,000 in 2016 was 52%, while household incomes under \$40,000 decreased from 17% in 2011 to 14% in 2016. Halton has a low proportion of low-income persons at 8.2%, based on Statistics Canada's low-income measure after tax (LIM-AT). A full environmental scan of Indigenous data was also undertaken in the project, which is available online.

Housing

The Halton Region Comprehensive Housing Strategy Update 2014-2024 recognizes that residents should be able to remain in their community and has identified actions to provide coordinated services to residents who need support to obtain or maintain their housing. The Strategy Update also specifically recognizes the need to build community capacity and partnerships to meet needs.

Rental housing

The number of tenant households in Halton in 2016 was 37,000. Almost one in five households lived in a rented dwelling. Halton Region also produces an annual State of Housing Report.

The 2016 report identifies vacancy rates and rental housing costs to assess the health of the rental market. Halton's rental market vacancy rate in 2016 was the lowest for private rental units in the Greater Toronto Area (GTA) at 1.3%. The average monthly rent of private townhouses and apartments in Halton in 2016 was the highest in the GTA at \$1,405 per month, 27% higher than the provincial average. The State of Housing Report acknowledged that in addition to purpose-built rental units, apartments and townhouse units, renter households likely occupy single and semi-detached units including secondary suites, townhouses, condominium rental apartments and other rental arrangements. It further recognized that a continuum of community housing supports is needed to meet the needs of residents across their stages of life and varying income levels.

The 2016 report set the Assisted Income Threshold at \$48,500 annually for Halton. Households with an income below this amount often require government assistance to meet their housing needs due to the lack of market supply of affordable units.

Homelessness and precariousness

The Halton community recently participated in a process to develop a Community Safety and Well-Being Plan. In 2017, more than 500 participants were involved in this process.

One of the five preliminary issues identified for prioritization was the need to coordinate efforts to reduce homelessness and prevent eviction. As the plan notes, homelessness can result from many challenges in life such as a mental health issues, job loss, family conflict, domestic violence or an illness.

During a one-day point-in-time-count in 2016, it was identified that approximately 264 people in Halton were homeless, in addition to many others for whom housing was precarious, couch surfing or facing other circumstances that place them at-risk of becoming homeless or being evicted. A coordinated strategy to wrap services together with housing solutions can reduce the risk of homelessness in Halton. The 2016 federal Point-in-Time Count Initiative in Halton was conducted on April 5 by 12 volunteer teams from 25 community agencies across Halton. Surveys were conducted among 12 informal groups in the community, and in emergency shelters and transitional housing. Of the 264 individuals or heads of households in the general population who were identified, 229 participated in the survey.

Of the surveyed participants, 59 (26%) were in a shelter, 116 (51%) were in transitional housing, 21 (9%) were in public or unsheltered locations, and 33 (14%) were in locations not disclosed. The reasons for housing loss identified were: family conflict (63 or 27.5%), fleeing domestic violence (24 or 10.5%), illness or medical condition (56 or 24.5 %), job loss (23 or 10.0%), unsafe housing conditions (25 or 10.9%), housing affordability (58 or 25.3%), and other (39 or 17.0%). Halton Community Legal Services has developed a comprehensive screening tool, the legal health check-up (LHC), as an outreach tool for its services.

Between October 2014 and December 20, 2017, 725 individuals filled out the checkup. A section of the check-up relays the housing experience of respondents and highlights the housing precariousness experienced by individuals and households in Halton. For example, 41% of respondents reported living in a rental unit, while 10% were living with family or friends. Others were in shelters, couch surfing, renting rooms, in hospital, in shared accommodation or living in rooming houses. 13.2% were behind in their rent. 60 (8.2%) were being threatened with eviction and 69 (9.5%) had been given eviction papers. 15.3% were on the waiting list for subsidized housing.

77 respondents reported late payment of rent for their unit in the last year; 70 respondents reported more than four late payments in the last year. 21% were behind with utility bills. Respondents who lived in rental units also reported problems such as outstanding repairs (12%), infestations (13%) and other unsafe conditions (7.1%). Comments from respondents further identified unsafe conditions such as mould, flooding, water leaks, windows and doors that could not be secured, problems with stairs and railings with increased risk for falls, and electrical and plumbing problems. The last question in the check-up's housing section invites respondents to report anything else about housing issues. The comments provided illustrate the difficulty that low-income tenants face in finding affordable housing, emphasizing that social assistance does not cover their high rent and other needs such as moving expenses, bills and groceries.

In 2017, HCLS provided legal services related to housing issues in almost 800 cases, of which 256 were eviction cases. The issues in the housing cases are consistent with those identified in other data. In addition to providing legal services, intake and case workers make referrals to community resources and services. Frequent referrals are made to the Halton Housing Help and the region's Housing Stability Fund. These services proactively meet the needs of vulnerable Halton residents. In 2016, the Housing Stability Fund assisted 487 residents to help secure permanent housing, 201 to avoid eviction, 154 to avoid utility disconnection, and 373 with moving and storage costs.

The Point-in-Time (PIT) Count identified a population of First Nations and Métis individuals living precariously, as well as some households that had difficulty self-identifying their possible Indigenous heritage. The First Nations and Métis respondents were over-represented in the count compared with their percentage of the Halton population. The proportion of First Nations people in the PIT Count (3.93%) is 7.08 times as large as the proportion identifying as First Nations persons in the 2016 census (0.555%). The proportion of Métis people in the PIT count (1.3%) is 34.7 times as large as the proportion in the census (0.0375%). No Inuit were counted among the homeless population in the PIT Count. Methodologically, the PIT Count does not yield statistically significant results; Statistics Canada cautions about the reliability of small counts in the census.

However, the numbers do strongly indicate that the proportion of First Nations and Métis people among all people living precariously in the Halton area is many times larger than the proportion of the same groups in the general population. The proportion of Inuit people may also be similarly larger, but since no Inuit were identified in the PIT Count, nothing can be said from the data. Full analysis of the PIT Indigenous Data is available in the project document online.

Limitations of the data due to self-identification barriers

Local data on self-identification of Indigenous people accessing housing-related services is extremely limited, but should change over time. Initiatives are under way in the community to build capacity to collect data. For example, one strategic priority of the Mississauga Halton Local Health Integration Network is to “expand socio-demographic data collection and review to build the capacity of providers to assess and evaluate the impact of a person's social determinants of health.” In a recent speech at a community conference organized by HCLS and the Halton Poverty Roundtable, Renu Mandhane, Chief Commissioner of the Ontario Human Rights Commission, addressed the importance of collecting human rights data. She urged attendees to collect and report data on the programs and services provided in Halton, and to disaggregate that data by the groups known to disproportionately experience poverty—including First Nations, Inuit and Métis people. Mandhane also indicated that the province has embraced data collection as a vital tool in its Anti-Racism Strategic Plan. Recently passed legislation like the Anti-Racism Act, 2017, enables the government to require organizations to collect race-based data. The Commission is now urging the government to pass regulations

requiring public sector organizations, including those involved in health care, corrections, law enforcement, education and child welfare organizations, to collect and analyze race-based data, and report it publicly.

Based on existing data, at least 5,000 Indigenous people are in Halton, and the population is growing rapidly. Given the limited census methodology (i.e., sampling only people in private dwellings), there is good reason to believe that this number is larger and that the hidden segment of the Indigenous population experiences the greatest and most acute need. Census data, covering persons living in private dwellings where they usually reside, are valuable but limited for a service that focuses on disadvantaged people because many of those living precariously are almost certainly excluded. The general Indigenous population needs some services, but the need is more acute for the “precariat”. The obvious need from a research perspective is to gather original data that address the characteristics and needs of the Indigenous precariat: homeless or near homeless people with associated problems related to accessing health services, benefits and entitlements, protection from discrimination, etc. The need for local data is important to avoid stereotyping, homogenizing or pathologizing the Indigenous population. Too little is known about Halton’s rapidly growing Indigenous community and its needs, except that needs are great. Indigenous people may be reluctant to self-identify due to discrimination, lack of access to culturally responsive services, confusion over definitions, uncertainty over the standard of proof of Indigeneity and specific government policies that have eroded Indigenous identity over time.

Ancestry

In addition to addressing Indigenous identity, the federal census covers Indigenous ancestry. A full analysis of this information is available in the project online.

It is assumed that the lower the proportion of people indicating identity of those claiming ancestry, the greater erosion of ethnic identity. Thus, Métis people appear to experience the least amount of identity erosion followed by Inuit, while First Nations people show the greatest degree of identity erosion.

Prior to Confederation, laws were created to regulate and control what it meant to be an Indigenous person and, moreover, to assimilate Indigenous people. “Registered Indian” or “Status Indian” still refers to a legal identity given to individuals who meet a set of criteria to be registered with the Canadian government under the Indian Act and its predecessor legislation, the Gradual Civilization Act and the Gradual Enfranchisement Act. Inuit and Métis people do not qualify for registration. Conversely, section 35 of the Constitution Act recognizes and affirms the existing Indigenous and treaty rights of the First Nation, Inuit, and Métis peoples. Not surprisingly, numerous court cases have concerned the characterization of Indigenous identity and rights. For Métis people, *R. v. Powley* is one of the most important Supreme Court of Canada decisions on Métis rights and the question of who is a Métis person entitled to those rights. In 2003, a unanimous Supreme Court affirmed the existence of Métis rights and laid out a 10-part test to determine whether a person can exercise them. Building on the rights affirmed in *Powley*, the Supreme Court’s 2016 decision in *Daniels v. Canada* determined that Métis and non-

status Indigenous people are considered “Indians” under federal jurisdiction through section 91(24) of the Constitution Act. The significance of this decision has not been an obligatory extension of benefits to Métis and non-status Indigenous people from the federal government, but rather it clarifies that jurisdiction lies with the federal government. The case did not define a test of who qualifies as Indigenous, but did hold that determining whether particular individuals or communities are Non-Status Indian or Métis is a fact-driven question to be decided case by case.

The impact of other government policies that have led to low rates of self-identification, loss of culture and erasure was discussed in *Brown v. Canada (Attorney General)*, a 2017 decision on the Sixties Scoop class action lawsuit in Ontario. There is also no dispute about the fact that great harm was done. The “scooped” children lost contact with their families. They lost their Indigenous language, culture and identity. Neither the children nor their foster or adoptive parents were given information about the children’s Indigenous heritage or about the various educational and other benefits that they were entitled to receive. The removed children vanished “with scarcely a trace.” As a former Chief of the Chippewas Nawash put it: “[i]t was a tragedy. They just disappeared.” One of the clearest statements of the negative impact of government policy can be found in the opening paragraph of the Summary of the Final Report of the Truth and Reconciliation Commission: “For over a century, the central goals of Canada’s Indigenous policy were to eliminate Indigenous governments; ignore Indigenous rights; terminate the Treaties; and, through a process of assimilation, cause Indigenous peoples to cease to exist as distinct legal, social, cultural, religious, and racial entities in Canada. The establishment and operation of residential schools were a central element of this policy, which can best be described as ‘cultural genocide.’”

Discrimination

In December 2017, the Ontario Human Rights Commission published the results of a public opinion survey to “gauge and give voice to people’s attitudes – both positive and negative – about human rights in Ontario.” Discrimination on the basis of race, Indigenous ancestry and poverty were of particular concern. The results are startling: 70% of Indigenous respondents reported they experienced some form of discrimination in the past five years; and 21% said that it was because of their ancestry, ethnic origin or culture. Indigenous respondents were somewhat more likely to report discrimination because of disability, low employment income, and receiving social assistance. The survey also addressed attitudes towards Indigenous people. 57% of respondents said they feel at least somewhat positive towards Indigenous people. However, 49% held that Indigenous people receive too many government benefits.

The issue is not what was known in the 1960’s about the harm of trans-racial adoption or the risk of abuse in the foster home. The issue is what was known in the 1960’s about the existential importance to the First Nations peoples of protecting and preserving their distinctive cultures and traditions, including their concept of the extended family. There can be no doubt that this was well understood by Canada at the time. For example, focusing on adoption alone, Canada knew or should have known that the adoption of

Indigenous children by non-Indigenous parents constituted “a serious intrusion into the Indian family relationship” that could “obliterate the [Indian] family and...destroy [Indian] status.”

It was reported that this view is likely based on stereotypes about Indigenous people. Only 34% of respondents said they were familiar at least to some extent with the impact of colonialism on Indigenous people, and 35% were familiar at least to some extent with Indigenous or Indigenous rights. Awareness of Indigenous or Indigenous rights and the impact of colonialism were higher amongst Indigenous respondents, 57% and 46% respectively.

Attitudes in Halton

On October 19, 2017, HCLS launched the “I Am Affected” campaign to initiate conversation and provoke thought about the Indian residential school system, its legacies, and the process of reconciliation in Halton. A series of posters and banners released at the launch event depicted seven different images: of racism, discrimination, missing and murdered Indigenous women, residential schools, intergenerational trauma, and the Sixties Scoop. The posters are intended to build community understanding of the ongoing effects of residential schools and the resulting trauma that persists across generations. In completed evaluation/feedback forms, many respondents indicated they had a significant lack of awareness of residential schools and their legacy prior to the launch. Post-event, respondents almost unanimously indicated their knowledge had increased. As a result, people wanted to engage, learn more about and take part in reconciliation. This is exemplified by comments such as “How can I incorporate the information/emotional experience into my classroom to ensure I help/commit myself to the truth and open up the path to reconciliation?” and “How can non-Indigenous people help redress the wrongs that have been done?”.

For participating Indigenous people, an additional goal of the campaign was to spread the message that “we’re still here”. With no reserve and no residential school in Halton, many of those in the dominant culture are unaware of how the impacts of colonialism are experienced in their community. The Indigenous population is hidden, and historically Oakville has not proven itself to be a welcoming and safe community, which makes it difficult for people to self-identify their Indigeneity. One participant said it was the first time that she had publicly shared her experience of racism and lack of knowledge of her ethnic origin in her home community. The importance of reconciliation, awareness and education were emphasized throughout the launch event, and the messages will spread. 99% of respondents in the feedback forms agreed or strongly agreed that they will share the knowledge they learned with others in the community. One individual stated “I want to learn more about the Truth and Reconciliation Calls to Action— how to carry the vibration of this space into other places that so badly need it”. This comment is reflective of many similar statements received.

Culturally responsive services

The 2016 Comprehensive Housing Strategy (CHS) Report Card acknowledged the need for outreach to local Indigenous people in Halton “to ensure that Halton benefits from go-forward dedicated Indigenous funding for housing made available by the province.” Unlike in other nearby urban areas such as Hamilton, Toronto and Brantford, no Indigenous organizations or agencies are located in Halton. There is no Native Friendship Centre, Indigenous health organization, Native Women’s Centre or any independent, Indigenous-led social service or community service organization. Social service agencies in Halton, including those represented on the project advisory committee, recognized the need for culturally responsive services.

Data collected from six focus groups conducted at the Housing Summit in Burlington on October 13, 2016, in which 50 regional housing service providers participated, recognized “gaps in providing housing that is culturally appropriate for newcomers, addresses the needs of youth, seniors and multigenerational families, and for individuals with health and ability needs.” But for First Nations, Inuit and Métis people, the gap in culturally responsive housing services has not been recognized in Halton. The next section discusses the importance of culturally relevant housing services for Indigenous people. Before service gaps can be explored with service providers, knowledge of the problems within the Indigenous community rooted in the legacy of colonialism, intergenerational trauma, barriers to identification and best practices regarding cultural competency and safety and capacity is needed. Building a more caring society, The Truth and Reconciliation Commission, recognizing the legacy of inequality, stated that reconciliation must create a more equitable and inclusive society by closing the gaps in social, health and economic outcomes between Indigenous and non-Indigenous Canadians. This requires constructive action to address the ongoing legacies of colonialism that have harmed Indigenous people’s education, culture, language, health, child welfare, administration of justice, economic opportunities and prosperity, it said. The Ontario government has recently committed \$250 million over the next three years to work with Indigenous partners to address this legacy, close gaps in services and remove service barriers.

The federal government and First Nations, Inuit and Métis partners are co-developing distinctions-based housing strategies; such strategies must be founded in the values of self-determination, reconciliation, respect and cooperation. A Place to Call Home, Canada’s National Housing Strategy, further recognizes that housing rights are human rights and that progressive implementation of every Canadian’s right to access adequate housing is needed. The Canadian Human Rights Tribunal decision in the Caring Society case is instructive regarding building a rights based policy for funding and providing culturally appropriate services for Indigenous people in Halton Region. The decision is clear that services and funding should not be based on unrealistic assumptions about need and population size. At the same time, this decision should not be understood as requiring proof of the specific level of need before funding or services are provided. Based on the 2016 census data, many Indigenous people make Halton Region their home; the actual population is likely higher than the census found. Taking steps to develop culturally responsive housing for Indigenous people in Halton will reduce service providers and funders’ exposure to human rights complaints. More importantly, it will not only decrease existing discrimination in providing and funding important social services, but go a long

way to address the legacy of inequality faced by Indigenous people. Service providers and funders have a unique opportunity to engage the Indigenous population to create, implement and improve culturally appropriate services across Halton. To quote the Tribunal in Caring Society: “This is the season for change. The time is now.”

Literature Review

This section reviews the literature from Canada, Australia and New Zealand on Indigenous homelessness to identify challenges and best practices for Halton. In particular, it discusses (1) the definition of Indigenous homelessness, (2) some unique characteristics of Indigenous homelessness, and (3) the limitations to existing service programs and supports for adequately housed Indigenous people.

The Definition of Indigenous Homelessness

According to the Canadian Observatory on Homelessness, homeless is broadly defined to include: ...a range of housing and shelter circumstances, with people being without any shelter at one end, and being insecurely housed at the other. That is, homelessness encompasses a range of physical living situations, organized here in a typology that includes:

- 1) Unsheltered, or absolutely homeless and living on the streets in places not intended for human habitation;
- 2) Emergency Sheltered, including those staying in overnight shelters for people who are homeless, as well as shelters for those impacted or lacks security of tenure;
- 3) Provisionally Accommodated, referring to those whose accommodation is temporary or lacks security of tenure; and,
- 4) At Risk of Homelessness, referring to people who are not homeless, but whose current economic and/ or housing situation is precarious or does not meet public health and safety standards.

It should be noted that for many people homelessness is not a static state but rather a fluid experience, where one’s shelter circumstances and options may shift and change quite dramatically and with frequency. Jesse A. Thistle has developed the following definition of Indigenous homelessness in consultation with scholars, community members, knowledge keepers and elders: Indigenous homelessness is a human condition that describes First Nations, Métis and Inuit individuals, families or communities lacking stable, permanent, appropriate housing, or the immediate prospect, means or ability to acquire such, housing. Unlike the common colonialist definition of homelessness, Indigenous homelessness is not defined as lacking a structure of habitation; rather, it is more fully described and understood through a composite lens of Indigenous worldviews. These include: individuals, families and communities isolated from their relationships to land, water, place, family, kin, each other, animals, cultures, languages and identities. Importantly, Indigenous people experiencing these kinds of homelessness cannot culturally, spiritually, emotionally or physically reconnect with their Indigeneity or lost relationships.

It is necessary to combine these definitions to properly understand the ways in which the Indigenous community experiences homelessness, both in the local (colonial) context of high rents and a shortage of affordable housing, and in the broader (Indigenous) context of community and connectedness. Together, these definitions capture the complex relationship between land, housing and homelessness as a culturally understood experience—taking into account related factors such as displacement into reserve land, the history of the Canadian Indian residential school system and the Sixties Scoop. A distinct response to Indigenous homelessness is required if lasting solutions are to be achieved. Responses must address not only the physical structure of a home, but an Indigenous people’s need to reconnect culturally, spiritually, emotionally and physically with their self, family and community.

An Environmental Scan and Literature Review on Indigenous Homelessness in Halton Pathways to homelessness

Research suggests that there is no single pathway to homelessness or a well-defined set of characteristics of Indigenous people who experience homelessness, or who are at risk of becoming homeless. Some studies on Indigenous homelessness have identified factors such as violence in the home, discrimination by landlords, lack of affordable housing, and lack of addiction treatment programs. But as the Saskatoon Indian and Métis Friendship Centre (SIMFC) observes, “there are as many reasons for homelessness as there are homeless individuals.” What is clear from the literature is that Indigenous people who are homeless, or who are at risk of being homeless, have certain unique characteristics that must be recognized and understood. We discuss each of these in turn.

1. Intergenerational trauma

Intergenerational trauma may contribute to individual experiences of homelessness for Indigenous individuals. For Indigenous people experiencing homelessness, this collective narrative of trauma intertwines with individual experiences of homelessness. Their personal narratives cannot be extricated from the context of colonialism or from the broader story of Indigenous settlement. Government policies that have historically governed the lives of Indigenous people in Canada have caused unresolved trauma by disrupting and separating families and creating detachment from the community. This trauma includes situations in which Indigenous people were forced to live on reserve, treaties were broken, children were removed from their homes and Indian Act policies put an entire population at a higher risk of becoming homeless. For example, in numerous studies, a family history of residential school attendance is considered a major reason for contemporary homelessness.

2. Mobility

Indigenous homelessness is often a fluid experience, with individuals filtering through various options like staying with friends or family, sleeping at a shelter, or

taking to the land and sleeping at campsites, parks or on the street. More broadly, it is estimated that approximately 45% of Indigenous people in Canada have migrated to cities. This movement does not evidence a desire to abandon one's culture, but coincides with cutbacks to social housing and other related programs. Julia Christensen describes this process as "circular migration" in which those who leave their community for a particular reason—such as domestic violence, following their apprehended children, or seeking a better neighborhood for their children—find that housing in urban centres is lacking and end up returning to their community, where they face the same issues and leave again. Data on mobility patterns supports this, showing that Indigenous people "move from their home communities to the city and then back and forth between urban centres and smaller communities."

Understanding these patterns of mobility is essential to understanding the nature of homelessness for Indigenous people. As Paul Memmott and Daphne Nash note, "People maintain active social relations with extended family and kin ... and can call on them for accommodation and other resources. These and related behaviour patterns can increase the risk of homelessness for those who are requesting resources and for the wider household."

For example, a high degree of mobility can influence when and what services these individuals access. Research suggests that while homeless Indigenous individuals do seek assistance, they do not always seek out the agencies and service providers that might provide valuable help. The research team determined that increasing awareness of services to homeless individuals may be worthwhile, specifically an awareness of housing organizations by those needing housing the most.

3. Gender and social tension

Gender and social tension are key factors to understanding how Indigenous peoples experience homelessness. For example, many studies reported that women never slept on the streets during winter, instead staying with family or friends. It was more common for men to sleep on the streets, in ATM booths or in parks. In both summer and winter, only a minority of participants in the study accessed shelters, stating that they were charged a fee after one free night, were not allowed to consume drugs or alcohol, or felt they were treated poorly. All participants reported tension regarding staying with friends and family because they knew they were putting stress on their host. Many would try to alleviate this stress by coming back only at night, or contributing to the household in some way. Some felt a great deal of anxiety, as each day they had to find somewhere to stay at night, particularly in winter. While the sample size was small ($n = 44$), this study does offer important insights.

4. Age

Indigenous youth experience homelessness, particularly in terms of lack of connection with their culture. According to the 2013 Incidence Study of Reported Abuse and Neglect, Indigenous children are 130% more likely to be investigated

for child abuse and neglect than white children, and are 168% more likely to be taken into care. Children at risk are usually from poor families that struggle with a lack of affordable housing. In a study on the structural determinants of Indigenous youth homelessness, Cyndy Baskin notes that the Ontario Child and Family Services Act ...is not inclusive of Indigenous values, particularly around collective responsibilities for raising children, nor does it acknowledge the impacts of colonization or the inherent strengths of Indigenous peoples and communities. It does not make clear distinctions between neglect and poverty nor does it include aspects of prevention which is crucial to the well-being of the future of our children and youth. Misinterpreting poverty as neglect has resulted in mass removal of children from Indigenous families and communities such that the Truth and Reconciliation Commission found that "Indigenous children are still taken away from their parents because their parents are poor." In order to escape poverty, Indigenous youth often leave their families to complete high school, obtain higher education, find a job or access health care. This can lead to homelessness or more severe consequences.

For example, the Sheridan College Indigenous Student Support Centre at the Oakville Campus supports Indigenous students attending the college in Halton. Because of the lack of affordable housing in Oakville and Indigenous students' low income, many live in illegal basement apartments with two or three other students, making for possibly unsafe and overcrowded housing. In Lethbridge, Alberta, bridges were built between a reserve and the city to support Indigenous youth's transition to urban life. But the youth were not prepared for different expectations in the city such as stricter guidelines for receiving income support, and landlords not allowing long-term guests based on leases, or no tolerance for multiple guests or overcrowding.

5. Program services for Indigenous Homelessness

Proper services and support for Indigenous people who are homeless, or at the risk of being homeless, is crucial. The literature, however, reveals 1) tension between Indigenous forms of knowing and customs and how services or programs are provided, and 2) that Indigenous people find it difficult to self-identify in order to be eligible and receive support.

- 1) Conflicts between Indigenous traditions, housing program designs and service provider's Indigenous ways of knowing conflict with housing program designs. For instance, interviews with Blackfoot people in Alberta revealed that residents often felt they needed to ignore "cultural traditions that involve community sharing and reciprocity if they are to maintain adequate housing". Indigenous people can lose housing due to family or friends who are staying over and causing problems, being loud, or merely exceeding the housing authority's limit for the unit. Similar issues exist for service provision. Blaming victims is a concern, as are unrealistic expectations.

For example, Jesse Thistle, a researcher who experienced homelessness for years, felt that the people who helped him most were the ones who just listened while he set goals for himself, not those who set unattainable goals and gave

up on him when he did not achieve them. The majority of shelter programs in Canada are for non-Indigenous people, and some shelter users find that shelters react negatively, or remain indifferent, to Indigenous expressions of culture. The literature suggests that Indigenous people desire to be treated as individuals who are experiencing homelessness rather than being defined by it. These people also desire a facility with all the needed services under one roof so that when they are ready to leave, they have everything they need to succeed on their own. But when this is not the case, Indigenous people in urban centers turn to their own support networks, joining other Indigenous people (even if from other nations) to celebrate their common beliefs in Mother Earth. “Just being Native is enough sometimes.”

This is not to say that some good programs do not exist. For example, Na-Me-Res (the Native Men’s Residence in Toronto) is a shelter that “ensures that Indigenous people experiencing homelessness have access to a continuum of culturally appropriate supports that will assist them in securing stable, safe, and affordable housing while helping them to achieve their goals and aspirations”. Na-Me-Res provides programs to suit the varying needs of their clients. It has programs that assist with regaining culture, reconnecting with family, learning life skills and traditional teachings, and offers encouragement to continue education or obtain employment. It also has a nurse on site, and scheduled visits by a doctor and a psychologist. Between 2015 and 2016, the residence assisted 576 Indigenous men through outreach and mobile services, the men’s residence, and the Mino Kaanjigoowin and Sagatay programs. Programs like those offered by Na-Me-Res, with a direct mandate to assist Indigenous people, have been shown to provide value to their clients and create important relationships and bonds.

As one respondent stated in a study by Distasio and others: “I’d like to see more Indigenous organizations and/ or persons providing advocacy services on behalf of other Indigenous ...I’d like to have more support from a Native worker to help me adjust to the city”. This sentiment has been echoed in other studies and shows the importance of not only providing Indigenous-centered programming, but recognizing that having Indigenous staff can reduce barriers and foster positive interaction.

2) Service eligibility and the difficulty of self-identification

Indigenous individuals often face the difficult task of self identifying before being considered eligible for services or support. The Indigenous Housing Support Centre in Scarborough assists Indigenous individuals and families to obtain affordable housing, streaming people into Native or social housing. In order to qualify for Native housing, self-identification is necessary, but it is difficult if the individual does not have a Status or Inuit card. Executive director Warren Canney explained that in order to qualify without one of these cards, applicants must fill out a form that details their parents, their family background and the nation they identify with. Their identity must be confirmed by affidavit; individuals cannot swear an affidavit as sole proof of ancestry. Canney said that self-identification is the most difficult part of the process, as some people do not know where they came from or who their parents were. Those seeking

access to services are responsible for proving their identity; they must uncover the details in order to satisfy a funder and service provider that they qualify for Native housing. Some clients become frustrated and give up. Others (such as those in prison) have the time to do the research and are able to do some digging. Still others, such as those who were adopted who have not been able to access their records, or those who do not know who their family is, face significant challenges. Some programs have recognized these difficulties, but outside the housing context. For instance, at Sheridan College self-identification is voluntary and confidential, and documentation proving Indigenous ancestry is not needed. However, documentation may be required to maintain eligibility for certain academic scholarships or bursaries.

Conclusions and Lessons Learned

Based on the environmental scan and review of relevant literature, the following conclusions can be drawn:

1. Indigenous homelessness is a complex problem that will not be solved simply by providing a roof over people's heads. Broader issues such as community connectedness and Indigenous identity must be considered.
2. The Indigenous population in Halton is growing. High-level aggregate data about the situation of Indigenous people exists, and snapshot data on homelessness provides much-needed localized data. However, more Halton data are needed to understand the full complexity of problems facing Indigenous people. Better collection of local data is required to learn more about the needs and characteristics of this community. Also needed is development of shared definitions and processes for self-identification across social and community services, training for staff to build cultural competency and understanding of the legacies of colonialism, and training on practice regarding intergenerational trauma.
3. While legislation, the Truth and Reconciliation Commission's Calls to Action and court decisions have laid a broad foundation to deal with systemic factors disadvantaging Indigenous peoples, they alone are not sufficient. Community-level programming and integration of legal assistance with other services is necessary to address the complex, clustered and inter-related legal and non-legal problems experienced by Indigenous peoples.
4. The need to learn from the community and to improve services and supports is clear from numerous examples of housing policies and conditions of private leases that conflict with Indigenous culture and social arrangements, having the perverse effect of exacerbating homelessness among Indigenous people. This is consistent with the TRC's Call to Action 57, which addresses the need for professional development and training: We call upon federal, provincial, territorial, and municipal governments to provide education to public servants

on the history of Indigenous peoples, including the history and legacy of residential schools, the United Nations Declaration on the Rights of Indigenous Peoples, Treaties and Indigenous rights, Indigenous law, and Indigenous–Crown relations. This will require skills based training in intercultural competency, conflict resolution, human rights, and anti-racism.

5. The policies and programs surveyed suggest that the best strategy to facilitate this learning likely involves partnering with Indigenous and other service agencies that are assisting Indigenous people. An action-oriented strategy building on an active offer of service would build a presence, trust and credibility with the Indigenous community in Halton. The need to partner with Indigenous service agencies and community members is also evident from the fact that many Indigenous people are reluctant to self-identify and to seek assistance.
6. Indigenous community members must be involved in every stage of program delivery, design and evaluation. Such involvement will be critical in determining the criteria of eligibility to access services. It should also build trust between communities, which is vital to addressing homelessness within contemporary colonial geographies. Indigenous peoples have the right to determine and develop priorities and strategies for exercising their right to development. In particular, Indigenous peoples have the right to be actively involved in determining health, housing and other economic and social programs affecting them and, as far as possible, to administer such programs through their own institutions.
7. Broad, expansive and inclusive access to holistic services that recognize the erosion of Indigenous identity due to colonial policies and laws would do more to address inequality and over-representation of Indigenous people amongst the homeless population than restrictive criteria that risk perpetuating historical patterns of disadvantage and exclusion.

2. Investment Plan

Reaching Home Annual Allocation

2019-2020: \$773,356

2020-2021: \$755,856

2021-2022: \$966,947

2022-2023: \$959,817

2023-2024: \$959,817

	2019-20	2020-21	2021-22	2022-23	2023-24
Housing Services	42%	42%	39%	40%	40%
Prevention and shelter diversion	43%	44%	50%	50%	50%
Support Services	0	0	0	0	0
Capital Investments	0	0	0	0	0
Coordination of Resources and Data Collection	15%	14%	11%	10%	10%
Administration	0	0	0	0	0
TOTAL	100%	100%	100%	100%	100%

3. Cost-Matching Requirement

Projected External Funding towards Homelessness Initiatives						
Funder	2019-20	2020-21	2021-22	2022-23	2023-24	2019 - 24
Municipal	\$582,000	\$582,000	\$582,000	\$582,000	\$582,000	\$2,910,000
Provincial: Community Homeless Prevention Initiative - CHPI	7,620,000	7,620,000	7,620,000	7,620,000	7,620,000	\$38,100,000
TOTAL	8,202,000	8,202,000	8,202,000	8,202,000	8,202,000	\$41,010,000

4. Coordinated Access

Indigenous individuals were engaged in our Coordinated Access Plan through robust coordination and planning initiatives undertaken by our CSWB Action Table partner with Halton Community Legal Services. The result of this work became a community action plan on Indigenous homelessness and forms a central component of our overall Coordinated Access system framework.

Version 1 of our Coordinated Access system framework has been completed, and includes two years of coordination with executive level staff, as well as 6 months of front line engagement to define, plan for and implement Coordinated Access in our community.

Background

In the fall of 2016, Halton Region hosted a Housing Provider/Support Services Agency Summit. This was the first time that community, transitional and supportive housing providers worked alongside support services agencies in Halton Region to begin the process of common training for our mutual clients in the sector. As part of this Summit, Sheridan College conducted focus groups comprised of the executive directors, supervisors and front line staff of a number of housing providers, services agencies and community organizations, to better understand the strengths and weaknesses of the current housing and homelessness serving sector. Building upon the outcomes of the

focus groups conducted at the 2016 Summit, Halton Region embarked on a collaborative process with community partners to improve access to housing and supports through the development and implementation of this.

Framework for Coordinated Access

This framework **is a living and evolving document that** provides direction on the implementation of a region wide, client centered, coordinated access system for supportive housing and service delivery. It is important to acknowledge that every effort has been made to ensure this framework aligns with the federal National Housing Strategy as well as the Ontario Long-Term Affordable Housing Strategy. In 2017, a Housing & Homelessness Leadership Group was established, comprised of key stakeholders representing a cross section of housing providers and support services agencies across the housing, mental health and addictions, community services, and children and youth services sectors, along with representation from the Mississauga-Halton LHIN, and the Hamilton, Niagara, Haldimand, Brantford LHIN for the purpose of providing system leadership and input into the development and implementation of a coordinated access system.

The purpose of the group is to provide leadership, direction and input into the development of a community based client-focused action plan. This action plan will improve the client experience for those at-risk of and/or experiencing homelessness in Halton by developing systemic client pathways and enhancing integration of current service providers.

The guiding principles of this work include:

- Recognition of housing as a human right;
- Commitment to a housing first approach;
- Commitment to equity in access to housing and services;
- Commitment to a rights based approach to housing and services;
- Commitment to evidence based planning & policy recommendations;
- Commitment to a client centered approach to program delivery; and,
- Adoption of an OPEN DOORS Approach.

The Leadership Group also functions as an Action Table under the broader Community Safety and Well- Being (CSWB) plan. Where there are systemic concerns beyond the scope of this framework, they may be presented to the CSWB system leadership group which is positioned as the vehicle to address these larger system issues that may include the LHIN's, Halton Regional Police, School Boards, or other Provincial institutions. Data and evaluation form an integral component of the implementation of this framework for coordinated access. By incorporating data and evaluation into the overall goals of the system, we will lay the foundation for evidence based decision making related to policies and programs to address homelessness in Halton. Data and evaluation are essential to understand the impact and effectiveness of the system in reducing homelessness within the community; Halton will be conducting a Point-in-Time count in the spring of 2020 as part of the data collection process.

This framework is rooted in the principles of housing first, which is widely acknowledged by the Homeless Hub and cities across Canada, the United States, and in the UK as a model for best practice in addressing the issue of homelessness and will be implemented, in varying forms, across the homelessness system in order to strengthen client outcomes and promote rapid exits from homelessness. The five core principles of housing first include: Immediate access to permanent **housing** with no housing readiness requirement; Consumer choice and self-determination; Recovery Orientation; Individualized and client-driven supports; and Social and community integration. The Halton framework is rooted in a person centered, housing first approach and agreed upon case management philosophy to support the framework. The Leadership Group recognized that many agencies have well-established case management protocols in place, and this framework is not intended to take precedence over those program specific case management protocols. Agencies and organizations operating within the homeless sector will be expected to ensure that their case management protocols and standards are aligned with the community of care case management philosophy outlined in this framework.

Halton Region, as the Service Manager for the sector, is dedicated to facilitating ongoing training opportunities for all agencies in support of this common approach. Fundamental to Halton's community of care case management philosophy is the belief that by engaging and working with individuals in all aspects of their care they will have a greater likelihood of maintaining their housing and achieving a quality of life through developing meaningful plans, enhancing their life skills, addressing their physical health and mental health needs, engaging in meaningful activities, and building social and community connections.

Coordinated Access in Halton will:

- Engage the individual where they are – a strengths based approach;
- Recognize and accept that individuals are the 'experts' when it comes to their unique circumstances;
- Engage in meaningful collaboration when working with the individual around goal setting; and,
- Treat all individuals with dignity and respect when it comes to their choice in housing and services.

System Leadership Community of Care Case Management Philosophy

Section 1: System Coordination Framework

What is Coordinated Access?

The purpose of establishing a Coordinated Access system is to make it easier for individuals and families to access the appropriate housing options and connect them with the programs and services that will meet their needs and preferences in a timely manner. Coordinated Access is not a program, but rather a community-wide process designed to streamline and provide consistency to the process through which people who are experiencing homelessness access housing services. It is a collaborative process

designed to improve the individual's ability to access the appropriate housing and supports through a community wide streamlined entry, screening and referral system.

Coordinated Access or Coordinated entry systems have been used in the United States and in some Canadian communities for many years. In the process of developing this framework, an extensive literature review of best practices in system coordination was undertaken from successful models around the world. Essential elements of an effective coordinated system include: Coordinated Access Common pre-screening tool, By-Name List, and Integrated service delivery. A **coordinated access** system will provide for specific points of entry that streamline intake and screening processes making it easier to match individuals to the appropriate housing and supports based upon their individual needs. Instituting a **common pre-screening** tool will ensure clarity, transparency, consistency and accountability across supportive housing and/or support service providers that will ensure that any individual in need of assistance will be identified in a standard and consistent manner, and connected to the housing/services that are most appropriate for them in a timely manner.

The **VI-SPDAT** (Service Prioritization Decision Assistance Tool) tool is not an assessment tool, it is a triage tool or pre-screening tool to assist in identifying those individuals who are in the greatest need. Coordinated Access systems use prescreening tools like the VI-SPDAT to assist in prioritizing housing by vulnerability rather than chronological wait. This tool will assist in making the decision as to which housing program best matches the individual's needs. Once directed to the appropriate housing and supports, further assessment and program eligibility screening will be undertaken by the agency administering the program and services.

Initiating a **By-Name List** will enable Halton to ensure that individuals who are the most vulnerable have priority access to housing and supports, and that they gain access to the appropriate housing and services that meet their immediate and long term needs, expediting their transition from homelessness to stable housing. **Integrated service delivery** fosters greater interagency collaboration to more effectively leverage the skills, expertise and resources in the community through a client-centered lens. Having a truly effective coordinated system will allow for: Identification of a systemic inventory of housing options as well as service gaps so that regional, nonprofit, and community resources can be targeted to address the gaps more effectively; System wide data collection to track clients progress through the system to ensure they are being directed to the appropriate housing and support services; Community wide collection of quality data to support evidence based policy and program decisions; Assist in prioritizing where additional resources and supportive housing opportunities would be better allocated.

Why Coordinated Access is Important (Employment & Social Development Canada – 2019)

Having a Coordinated Access System is critical to being able to act early on to identify, screen, prioritize and connect individuals and families who are at risk of homelessness to the appropriate housing and supports. Halton's Coordinated Access System will: Provide

for specific entry point(s) for people in need of housing and supports; Utilize a common intake and acuity screening tool (VI-SPDAT); Connect people to the right type of housing and supports matching eligibility and prioritization criteria; Enable real-time data collection related to the individual's entry into and exit out of the system; Facilitate quick access to appropriate housing options and more effective, integrated service delivery across Halton. A Coordinated Access System gives communities the opportunity to establish collaboration between funders, housing services providers, community organizations, nonprofits and the private sectors to work together to coordinate services that enhance the lives of those individuals and families in the community who are experiencing homelessness. As part of the Action Table's sector-wide approach, both the 'Hamilton Niagara Haldimand Brant' and 'Mississauga Halton' Local Health Integration Networks were heavily involved in the design of Halton's Coordinated Access system. Screening tool adaptations were made to the OneLink centralized intake process in order to better assist MH-LHIN agencies to identify homeless individuals. As the LHINs transition to Ontario Health Teams, it must be determined if supportive housing units funded by the health sector will adopt the centralized placement model established within the Coordinated Access framework or carry-on with agency-by agency wait lists.

Section 2: Strategy Development

Engaging Front Line Staff Coordinated Access

Three key working groups have been established to provide guidance to the Housing and Homelessness Leadership Group in support of this framework to ensure a more cohesive, and "on the ground" response to addressing homelessness in Halton. Each of the three groups were scheduled to meet once a month, for a two-hour session for up to six months. The expectation is that the groups will have developed recommendations as to strategies, protocols and mechanisms that can be implemented as part of the Coordinated Access System. These recommendations were brought forward to the Leadership Group. Accepted and approved.

For successful implementation of Coordinated Access, it will be important to support agencies and their staff through on-going training and development opportunities in the use of tools such as VI-SPDAT, the COTS (Client Outcome Tracking System), and on work related topics such as trauma informed care, motivational interviewing, harm reduction and case management.

Section 3: Implementation

This framework serves as a guide for agencies to work more collaboratively using a system wide lens to streamline access to housing and supports. As a framework, it will continuously evolve as the capacity of the sector increases and needs in the community are identified. In this section a number of strategies have been identified that will facilitate the implementation of Coordinated Access across the homeless-serving sector. These strategies are interconnected and should be undertaken simultaneously by housing providers, support service agencies and funders. The development and launch of an on-line platform will enable agencies to access on-line training and resources that will enhance and support interagency collaboration and communication.

The Leadership Group proposed the involvement of front-line staff in the development of the implementation strategy for Coordinated Access. The Leadership group indicated that early engagement of front-line staff is essential to improving client pathways, identifying services gaps and developing system wide solutions. In consultation with members of the Leadership Group, frontline staff who are solution oriented, passionate and committed were selected to be a part of the development of the implementation strategy. To ensure all members of the working groups had a good understanding of what is meant by coordinated access, why it is important, and what their role is in the implementation process, all members participated in an orientation session. The working groups were comprised of three priority work streams:

- **Screening and Access:** support service agencies that serve as the first points of contact for those accessing Halton's crisis response system including shelters. The scope of work focused on processes for centralized access referrals, common screening, and after hour supports.
- **Community Supports:** support service agencies who assist and work with residents who are at risk of homelessness. The scope of work included focus on client pathways to access the crisis response system, identification of service gaps, and the identification of mechanisms for effective interagency communication
- **Housing Providers:** agencies who provide supportive housing. The scope of work focused on implementation of a By-Name-List; common screening; housing first wrap around supports; and disengagement plans.

Objectives and Strategic Actions

OBJECTIVE: Principles of Coordinated Access are understood and operationalized across all agencies in Halton Region.

Strategic Action Plan: Principles and values of Coordinated Access are shared and adopted by all agencies across the homeless-serving sector in Halton. Agencies work collaboratively to more effectively coordinate services across the homeless-serving sector through case conferences protocols, warm transfers and formal collaborative funding proposals. Establish shared policies and processes of homeless-serving agencies and partners, such as utilizing a common consent form to facilitate the ease of access to appropriate housing and supports

OBJECTIVE: Homelessness prevention services and funding can be accessed in a timely fashion to reduce occurrences of homelessness and ensure rapid approaches to re-housing undertaken when necessary.

Strategic Action Plan: Housing Stability Fund to continue to provide support for last month's rent, rental and utility arrears, moving, and storage. Access should be streamlined, responsive and connected with existing community supports. Homelessness prevention recognizes that greater coordination between Housing Providers, outreach case managers, and support services is necessary to target vulnerable populations with increased levels of specialized support. Continue to provide short term housing allowances to better allow for positive transitions to employment, social assistance and

other forms of housing independence where sustained short term assistance is necessary.

OBJECTIVE: Fully integrate and coordinate community access points with consistency in application of a common screening tool across the Region.

Strategic Action Plan: Establish coordinated entry points with current homeless-serving providers, Halton Housing Help, and Bridging the Gap (an entry point for youth). Use a *no wrong door approach* to ensure clients are able to easily access coordinated entry points to mitigate the necessity of telling their stories more than once. Implement and utilize the VI-SPDAT screening tool in a consistent manner at coordinated entry points to ensure clients are prioritized and matched to appropriate housing and services. Continue to monitor demographic information at access points to ensure vulnerable populations requiring specialized supports and recognized and provided for.

OBJECTIVE: The sector is familiar with shelter diversion as an effective tool in preventing homelessness.

Strategic Action Plan: Utilize shelter diversion across the system as a homelessness prevention strategy where appropriate alternative community support have been identified. Facilitate and support the capacity of agencies to undertake shelter diversion as homelessness prevention strategy through the development of a core training curriculum to ensure agency staff have the tools to provide a housing first approach and are confident implementing these strategies. Reduce the number of people experiencing chronic homelessness and entering the shelter system by implementing prevention and shelter diversion strategies. Ensure access to By-Name List is available for high acuity and chronically homeless individuals who have been diverted from shelter.

OBJECTIVE: Data collection and system evaluation are integral components to the success of Coordinated Access.

Strategic Action: Agencies funded by Halton Region will adopt the Client Outcome Tracking System (COTS) as the primary Homeless Management Information System, while other agencies and supports will be encouraged to utilize COTS to increase interagency collaboration to prevent clients from having to tell their story more than once. Robust data collection allows for tracking the in-flow and out-flow from the homelessness system and to be reported back to the community regularly. All agencies to be responsible for tracking and monitoring the agency's data entered into COTS to ensure is current and complete. Development of key system performance and program indicators to use as part of the evaluation of the Coordinated Access System

OBJECTIVE: Housing Access and Support is a streamlined and integrated process.

Strategic Action Plan: Development, implementation and continuous quality improvement of a centralized By-Name List to match the client's need to the appropriate housing opportunity and supports. Flexible case management and disengagement planning approach for housing providers to match clients' need and acuity level with

appropriate support. Develop and implement a core life skills curriculum to support agencies and clients as they transition to more independent living.

Section 4: Communication Strategy

In June 2018, the federal government introduced Reaching Home: Canada's Homelessness Strategy with the goal of reducing chronic homelessness by 50% over ten year. Under this strategy, communities are required to move towards a more coordinated systems-based approach to addressing homelessness. The key component of this will be the implementation of a system of Coordinated Access by 2022.

All Service Providers will be required to have an understanding of Indigenous homelessness, as well as having a strategy to provide inclusive services to racialized minorities, LGBT2S individuals, newcomers and Indigenous households. The goal of Coordinated Access is to help ensure fairness, prioritize people most in need of assistance, and match individuals and families to appropriate housing and services in a more streamlined and coordinated way. Critical to the successful implementation of Coordinated Access is a common understanding and acceptance of the importance of reducing and preventing homelessness in the community. In order to achieve this, a communications strategy has been developed to inform key community stakeholders of the transition to a community based approach to addressing homelessness in Halton. Access and entry points will be clearly communicated to partners not involved directly with the Action Table. Communications will include information, outreach and training to faith-based groups, community based groups, developmental services agencies and Developmental Services Ontario (DSO), the Ministry of Community and Social Services (MCSS), the Ministry of Housing (MMAH), Service Canada, and Regional Council. Coordinated Access to Housing with Related Supports Programming for those individuals who are unable to live independently and require 24/7 supervision has been ongoing for several years, and further Action Table planning will work to increase communication and integration with this type of programming. Future communications strategies will be developed related to the specific needs of the Indigenous population, the LGBTQ2s community, as well as newcomers.

Section 5: Agency Resources and Supports

Halton Region is dedicated to ongoing capacity building efforts in the sector and will continue to create customized training opportunities for identified areas of need. Resources have been developed for the purpose of supporting agencies who provide supportive housing and/or supports to the most vulnerable individuals in the community who are experiencing homelessness or at risk of experiencing homelessness. They also provide agencies with the resources and tools to share with staff to ensure a consistent quality of support for individuals in the community. In the Resource Guide: Key Definitions; Inventory of agencies providing Supportive Housing Programs and Support Services; Samples of VI-SPDAT Screening Tools; Sample Common Consent forms; Recommended policies and/or processes; Links to On-Line Training Resources Links to websites and/or articles pertaining to best practices Community Resources.

Summary of recommendations from the Coordinated Access Working Groups on centralizing access points and referral processes

Preamble

In the fall of 2016, Halton Region hosted a Housing Provider/Support Service Agency Summit. From this Summit the Housing and Homelessness Leadership Group was established, representing a cross section of housing & homelessness service providers across Halton. The goal of the leadership group is to address system issues and discuss a more coordinated approach to resolving chronic homelessness in Halton. The Homelessness System Leadership Group continues to provide leadership, direction and input into the development of a community based client-focused plan to improve client pathways and enhance the integration of our service providers. The Leadership Group also functions as an Action Table under the broader Community Safety and Well-being plan.

Coordinating our Efforts

During the leadership group meetings, involvement of front-line staff in the implementation of coordinated access was considered a critical element to the success of this new strategy. Engaging front-line staff in this process is essential to improving client pathways and recognizing service gaps. The purpose of the Coordinated Access Working Groups is to provide guidance to the Homelessness System Leadership Group to support the implementation of Coordinated Access, resulting in a more cohesive response to addressing homelessness in Halton. Three working groups were created to achieve our goal: Community Supports, Screening and Access and Housing Providers.

Our Approach

Each session included a guided conversation on various topics relating to Coordinated Access Principals including: a no wrong door access, limiting a client from having to tell their story more than once, shelter diversion, levels of service and housing placement determined by vulnerability. Participants were encouraged to discuss topics open and honestly. At the conclusion of each meeting, members were assigned homework, which was reviewed at the following group. Warm Transfers and a No Wrong Door Approach Case Coordination Common Assessments Housing First and Housing Placements Centralizing homelessness system access points is a key component to the implementation of Coordinated Access. Due to the vast geographical landscape of Halton Region it was identified that multiple homelessness system access points would be required across the Region to triage homeless households to the supports they need in their own community. Clients can access Halton's Homelessness Response System in one of two ways.

1. Through Emergency Shelters - Clients experiencing homelessness who have no other housing options should always be directed either the Salvation Army Lighthouse (for single individuals), or the Family Shelter Program (for families).

2. Through Halton Housing Help (HHH) - Clients who are experiencing unsheltered homelessness (living on the streets, in tents, storage units, etc.) should be connected with HHH's Outreach Case Manager. Clients may also be referred to HHH for housing search support if they are at risk of homelessness. Clients entering the homelessness response system through one of these centralized access points will be assessed by administering the VI-SPDAT to be included on the By-Name List for housing prioritization. To build on this centralization Housing Services has created Halton's Homelessness Collaborative (HHC), a group where representatives from access points into Halton's homelessness serving sector meet to discuss the most acute clients in our community, problem solve, and prioritize housing placements through the By-Name List. This table is also a forum to discuss clients that are at imminent risk of becoming homeless

Recommendations - Centralizing Homelessness System Access Points

Frame of Reference: Referrals 311 was determined to be an effective way to refer into our homelessness response system when a household is not already connected with a service provider. 311 will triage clients to the appropriate homeless system access point based on the information provided. Where a client is already working with a service provider a direct referral should be made to the appropriate service.

Recommendation: Update 311 scripts to ensure clients are triaged appropriately, and provide regular training to 311 staff. To aid us in the implementation of centralizing of our homelessness access points the working groups recommend the creation of a joint referral form which would include following agencies: Bridging the Gap, Housing Stability Fund, Halton Housing Help, Lighthouse Shelter and Family Shelter. Current practice does not allow for Service Providers to advocate for clients to access Emergency Shelter without staff speaking to a client directly. Working Group members would like this practice to be reconsidered. In the absence of a reconsideration, the group recommends that the joint referral form be used as an "alert" for shelter staff when a client may need to access emergency shelter. The referral form would include clients name, current housing status, referring agency contact information, and reason for referral. The form would allow for a selection box for each agency and the appropriate email box to send it to (see below for example) and would be attached with a common consent form. The referral form should be used by all service providers in the community which would significantly decrease the amount of time staff are spending completing referrals and utilizes a no wrong door approach by limiting clients from having to share their story more than once. It will also keep all entry point agencies advised of where a client is being referred. Initial contact should be made within 48 hours (immediately for emergency shelter). All referring agencies should be updated on the status of the referral within 5 days of the referral where consent is provided. Service providers would like the option to refer into the homelessness response system through a user friendly website. Housing Services is currently investigating these capabilities. Working Groups recommend the inclusion of a second form, which will include all available housing options, program criteria and a selection box for referring staff to complete. This will assist the Housing Collaborative in determining appropriate housing placement where a vacancy occurs.

Recommendations - Centralizing Homelessness System Access Points

Centralizing Homelessness System Access Points - Halton's Homelessness Collaborative - Mock up After Hours Support: Providing adequate supports to individuals and families after business hours is a priority for the Region.

Recommendations: Accessing after hours' support is a challenge when shelter is at full capacity. Agencies believed that a follow-up system and policy is required. It is believed that a client should not have to contact the shelter the next day should there be no capacity in the shelter. It was recommended that all screening and access agencies should complete a shelter diversion script with clients.

Recommendations - After Hours Support

VI-SPDAT Coordinated Access requires communities to establish a mechanism for determining which individuals will be prioritized for access to supports and housing. A healthy Coordinated Access System is not based on "first come first served". Instead, it should include a standardized intake process that includes an assessment tool that provides understanding and insight regarding the strengths and vulnerability of each person. Halton Region will be moving ahead with utilizing the Vulnerability-Index Service Prioritization Decision Assistance Tool (VI-SPDAT) to prioritize its residents for housing supports.

Recommendations: As clients enter a centralized access point the VI-SPDAT will be completed by staff. Where a client has identified as chronically homeless the VI-SPDAT may be completed immediately upon entrance to a centralized access point. For those who are episodically homeless or entering homelessness for the first time the VI-SPDAT should be completed between the 5th-7th day. Research has shown that households often resolve their own homelessness within this time frame, also completing the assessment too early can result in inaccurate responses as a result of the housing crisis. The VI-SPDAT should only be completed by homelessness system access points to ensure consistency. As Coordinated Access evolves over time consideration should be made to expand the pool of assessors with proper training.

Recommendations - Common Assessment Recommendations - By-Name List

A By-Name List is a **real-time** list of **all** people experiencing homelessness in our community. It includes a robust set of data points that support coordinated access and prioritization at a household level and an understanding of homeless inflow and outflow at a system level.

Recommendations: As households enter and exit our homelessness system access points (BTG, HHH, LH, FS) service providers will be responsible for maintaining a real time electronic registry of all clients in their program experiencing homelessness. Regional staff will collect data from each registry to be uploaded to the By- Name List. As the Region moves ahead with COTS enhancements ideally there will be functionality to access this information without the use of a registry.

Inflow & Outflow

Housing Placement and Prioritization Regional staff will be notified when a vacancy becomes available.

Recommendations: Housing placement and prioritization should be determined by using two streams: 1) Independent Scattered Site Housing should be prioritized by VI-SPDAT, length of homelessness and the Housing Providers program scope (i.e. Employment focus); 2) Shared Accommodations should be prioritized by the VI-SPDAT, and discussed at Halton's Homelessness Collaborative. A representative from the housing provider agency will be invited to the table to be part of this consultation when there is a vacancy. Length of time in a supportive housing unit should be determined by level of acuity. IE low acuity 0-6 months, medium acuity 6 months-1 year, high acuity 2-3 years. Transitional housing length of stay should be tailored to individual needs. Staff report that clients are spending time in housing adjusting to being housed, leaving staff with only one year to work with individuals on any substantial goals. By tailoring stays to need, Providers are confident there will be more positive outcomes and will see an increase in clients long-term self-sufficiency. Clients who are currently in a transitional housing unit who maintain a higher VI- SPDAT should be prioritized for permanent supportive housing (based on best practices).

Recommendations - By-Name List

Client Accompaniment

Client accompaniment are components of intensive case management programs and often entails accompanying the client to various appointments including but not limited to: unit viewings, medical appointments or initial appointments with other service providers. Accompanying the client to appointments allows the case manager to advocate on the client's behalf and to make sure the client is comfortable.

Recommendations: There was overwhelming support for accompaniment of clients among agencies. It is recommended where possible, accompaniment should be provided to clients when there is a minimal risk to safety for staff. Agencies believed that accompaniment allow rapport to be developed with clients, in addition to the ability to advocate for clients during appointments

Intake

Recommendations: A One-Link referral for case management and supportive housing should be completed upon entry to any Transitional Housing program to ensure appropriate supports are in place It will be the joint responsibility of the referring agency and Housing Provider to work together to ensure that clients' belonging are bed bugs free prior to admission into any Transitional Housing programs. This includes providing access to showers, washer and dryer to launder clothes

Recommendations - Housing Provider Housing First Case Management

Adopting a Housing First Approach is an essential component to the implementation of Coordinated Access.

Recommendations: Many members of the housing provider working group felt that it was difficult to adopt a Housing First approach and recommend that Housing Services

coordinate formal Housing First training to all Housing Provider staff housing individuals and families 11 Tenancy Concerns Addressing tenancy concerns and non-compliant challenges with tenancy is vital for the success of any Housing Program. All efforts should be implemented to ensure that tenants do not access the shelter system

Recommendations: A resource guide to be developed that identified key community resources for tenants to access. It was identified by many members of the housing provider working group that tenants often lack soft skills upon entry into the housing program for clients with high acuity where all strategies to prevent tenancy loss have been exhausted, agencies can refer to the Homelessness Collaborative Table for support

Recommendations-Housing Providers

Disengagement plans should commence immediately upon entrance to any housing program. Case management should be focused on the successful transition from on-site transitional housing support to independent or community based supports. As goals are set, in progress and attained, the disengagement plan should be updated to reflect the client's success in moving towards independence.

Recommendations: Improve/maximize household income, ensure taxes are completed, HATCH application, OW/ODSP income supports, credit counselling. Connection to long-term community based case management support. Link referrals for case management and supportive housing should be completed upon entry to any Transitional Housing program. Provide referrals to employment services where applicable- Employment Ontario referrals, explore soft skills/life skills programming. Reducing isolation through recreation and social inclusion programming. Acquisition of permanent independent housing should begin long before discharge date. Completion SPDAT annually to monitor progress. Clients who are currently in a housing program who maintain a higher SPDAT score be prioritized for permanent supportive housing as vacancies arise (based on best practices).

Inter-agency Communication

Inter-agency communication is paramount to successful client outcomes and the implementation of a coordinated access system.

Recommendations: Working groups should meet on a monthly to quarterly basis to provide feedback to the Coordinated Access System A online platform currently being explore by the Region to ensure knowledge is shared among all agencies.

5. Community-Wide Outcomes

No additional outcomes have been identified at this time.

6. Official Language Minority Communities

The Regional Municipality of Halton is committed to ensuring that we address the needs of homeless persons in both official languages. To this end, we actively encourage organizations representing the OLMCs to apply by issuing Calls for Proposals in both official languages, and have maintained good relationships with a local Francophone Association. According to project data, in 2018-19, less than 1% of the homeless community identified as a member of the OLMCs. However, we include a clause in all sub-projects agreements to ensure that service providers are prepared to offer services in French, should there be a request. We also have good connections with a local Immigration Assistance Organization that can help individuals access translation supports. We will continue to monitor that service providers are meeting this clause, and we will continue to monitor the demand for services in the official minority language on an ongoing basis so that a right mix of sub-projects is in place to support the OLMCs.

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